

PO DRAWER E  
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STATE OF DELAWARE  
MOTOR FUEL TAX ADMINISTRATION  
LICENSED SPECIAL FUEL USER/DEALER RETURN

RETURN MONTH	USER LIC#	DEALER LIC#	FEI/SS#:
NAME OF LICENSEE			
ADDRESS			
STORAGE TANK LOCATION IN DELAWARE			
SEE INSTRUCTIONS		DO NOT USE OR SHOW TENTHS	
<u>RECEIPTS AND DISBURSEMENTS</u>			
1. OPENING INVENTORY			
2. RECEIPTS DURING MONTH: INDICATE RECEIPT SCHEDULE NUMBER, PRODUCT CODE AND GALLON TOTALS FROM EACH INDIVIDUAL SCHEDULE.			
SCHEDULE NUMBER:	PRODUCT CODE:	GALLONS:	
SCHEDULE NUMBER:	PRODUCT CODE:	GALLONS:	TOTAL RECEIPTS
3. TOTAL TO BE ACCOUNTED FOR: (LINE 1 PLUS LINE 2)			
4. A. TAXABLE USE	B. TAXABLE SALES	TOTAL TAXABLE GALLONS (LINE 4A PLUS 4B)	
5. A. NON-TAXABLE USE	B. NON-TAXABLE SALES	TOTAL NON-TAXABLE GALLONS (LINE 5A PLUS 5B)	
6. TOTAL DISBURSEMENTS: (LINE 4 PLUS LINE 5)			
7. CLOSING INVENTORY (LINE 3 MINUS LINE 6)			
8. ACTUAL INVENTORY			
9. LOSS (LINE 7 MINUS LINE 8)			
10. GAIN (LINE 8 MINUS LINE 7)			
<u>TAX COMPUTATION</u>			
11. TOTAL TAXABLE GALLONS (FROM LINE 4A + 4B)			
12. LESS TAX PAID GALLONS (AS REPORTED ON RECEIPTS SCHEDULE #1)			
13. TOTAL TAX DUE (LINE 11 MINUS LINE 12 X <u>\$0.22</u> CENTS PER GALLON)			
CHECK #			

CERTIFICATION

I HEREBY CERTIFY UNDER THE PENTALTIES OF PERJURY THAT THIS RETURN IS A TRUE, COMPLETE AND CORRECT REPORT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

PRINT NAME	SIGNATURE	TITLE	DATE
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RETURN & TAX REMITTANCE MUST BE U.S. POSTMARKED ON OR BEFORE THE 25TH DAY OF THE MONTH FOLLOWING PERIOD OF THIS RETURN. SEE INSTRUCTIONS FOR REMITTING TAX PAYMENTS VIA ELECTRONIC FUNDS TRANSFER (EFT). RETURN MUST BE FILED EVEN IF NO TRANSACTIONS OCCURRED DURING THE REPORTING MONTH.

DOC# 55-02/96/05/11